Uniform Business Office Newsletter

Helping frontline users perform their day-to-day jobs

Volume 4, Issue 2 Jan – Mar 2006

IN THIS ISSUE

- 1. Annual Conference Wrap-Up
- 2. User Guide Draft
- 3. SIT/OHI Conversion
- 4. CY2006 OIB Rate Package Release — Soon
- 5. What's Next for Cosmetic Surgery Billing?
- 6. NPI Reminder!
- 7. MSA Metrics
- 8. Compliance Program
- 9. MAC Enhancement Reports
- 10. VA Billing Inpatient Billing Guidance Being Developed
- 11. CMBB Remains on the Horizon
- 12. UBO Training Center

IMPORTANT NOTICE: Due to Privacy concerns, all personal identifiers, such as names and personal e-mail addresses, have been removed from this newsletter. We apologize for this inconvenience. If you have questions about an article, please do not hesitate to contact the UBO Help Desk (UBO.helpdesk@altarum.org/703-575-5385)

1. UBO/UBU Conference — "Your Ticket to Success"

The 2006 UBO/UBU Annual Conference was truly a "ticket to success" with almost 500 participants attending more than 90 educational sessions. Held at the National Conference Center in Lansdowne, Virginia, 13-17 March

2006, the conference gave front-line billing and coding personnel the opportunity to learn from their colleagues by networking not just at breaks and meals, but also during a vendor-sponsored reception.

Attendees were also able to relax with a tour of Washington, D.C.

Secure your funding to attend <u>next</u> year's conference, which will be held in early spring 2007.

Topics and issues covered during the conference included:

- Medical Services Account (MSA);
- Third-Party Collections (TPC);
- Medical Affirmative Claims (MAC);
- SIT/OHI Conversion Planning and Execution;
- Coding basics and 2006 coding updates;
- Data quality and auditing; and
- TPOCS/CCE hands-on training.

TMA CFO [Name Redacted] - Keynote Address

The conference was "off the ground and running" thanks to opening comments by TMA's Chief Financial Officer. In his discussion about "The Business of Healthcare," he presented the "big picture" of what is needed to run the \$38-billion MHS. He explained that rising costs and fully funding future retirees' health care have doubled the MHS budget over the past five years. The annual DoD cost for each MHS beneficiary is approximately \$2,500. He continued that MHS has, essentially, two missions: supporting the health care needs of the troops and supporting the health care needs of all other beneficiaries. He stated that AHLTA (formerly known as CHCS II), CCE, and CMBB are essential tools that will facilitate these MHS missions.

Call for Speakers

Interested in presenting a session at next year's conference? Send your name, contact information, and topic to UBO.conference.speakers@altarum.org

TMA's CFO concluded by stressing the need for quality data to make informed decisions, explaining that there "isn't any room to waste resources. We need to be making big leaps forward, at the same time making constant, small improvements."

Note from the UBO Program Manager

The UBO Program Manager thanks the Service POCs for their hard work and support and the subject matter experts who shared their knowledge at their presentations. Send suggestions for topics for next year's conference to your Service POCs.

2. User Guide Draft Now Available

The Annual Conference also gave the UBO the opportunity to introduce the new *User Guide*, which replaces the *2003 OIB Business Rules*. Many of the updated topics now in the *Guide* were introduced and discussed during Conference sessions. The draft is now available on the UBO Web Site (http://tricare.osd.mil/rm/documents/ubo/2006%20User%20Guide%5FTC%2Edoc). Send comments (changes to current topics, new topics, etc.) on this draft to your Service POCs.

3. SIT/OHI Conversion Hits Snag — Fix Is Underway

The SIT/OHI conversion has been temporarily halted while critical changes are made to the CHCS and TPOCS applications. The need for these changes was discovered during the December 2005 conversion at Madigan, Bremerton, McChord, and Oak Harbor. We expect the development and testing of the changes will be completed by early May 2006, at which time Vance Air Force Base and the Naval Ambulatory Care Clinic, Groton, will undergo conversion. Upon successful implementation at Vance and Groton, the process will continue in groups of 10 to 15 MTF sites until all sites are converted.

To account for the system changes being made, documents relating to the conversion were revised. This material, including recent SIT/OHI educational presentations, is on the UBO Web site (http://tricare.osd.mil/rm/index.cfm?pageId=10).

The SIT/OHI Change Packages 282-284 with the conversion software changes and the preactivation reports have been installed but not activated on CHCS servers. Installation lets UBO staff run new CHCS reports that help ready the SIT and OHI databases for conversion. Activation involves the actual conversion of local OHI to the new format, exchange of OHI with DEERS, downloading the DEERS SIT to the local CHCS server, changes to the CHSC/TPOCS interface, and changes to the user interfaces. To minimize disruption to billing operations, prepare for conversion *before* activation. The steps below assure a smooth conversion:

- Prior to activation, download the following documents (available on the UBO Web site):
 - Pre-Conversion and Post-Conversion Guides
 - o Post-Conversion Guide
 - DEERS MTF SIT online Web application tool
 - Quick Reference Guide for the Web application
 - March 2004 and 2006 SIT Table from DEERS
 - Excel spreadsheet listing updated DEERS HICs
- Next, you will need to:
 - Identify/assign staff for SIT/OHI entries
 - o Identify your DEERS SSM for new sign-ons
 - Obtain the following security keys from CHCS personnel:
 - Access Re-point: DG OHI MGMT (security key)
 - DG REPOINT OHI BATCH UTILITY (secondary menu)
 - Access OHI/PII and update: DG OHI (security key)
 - Access Pre-Implementation Reports: DOD SIT MGR (security key)
 - DG PRE-IMP SIT-OHI REPORTS (Option File, sub-menu)
 - Access basic SIT: DOD SIT (security key)
- Finally, follow the guidance in the Pre- and Post-Conversion Guides.

Additional SIT/OHI training teleconferences are scheduled in April. See "What's New from the UBO Training Center" in this newsletter for tentative dates and times.

4. CY2006 Outpatient Itemized Billing (OIB) Rate Package Release — SOON

New OIB rates are "just around the corner!" These new rates will include the 1 January 2006 CPT/HCPCS codes, for which the UBO has developed rates. Many of these procedures and codes currently do not have associated rates; therefore, until the rate package becomes effective (estimated to be 12 June 2006), MTFs cannot bill for them.

The CY2006 OIB rate package — which, at press time was submitted to CITPO and RITPO for testing — includes the following components: CMAC, Anesthesia, Ambulance, Dental, DME/DMS, Immunization, the Pharmacy Dispensing Fee, and the IMET/IAR percentages. Cosmetic Surgery was included in this package, but is now separate (see article below).

Teleconferences are scheduled to explain the overall changes in the new rate package and answer any questions that sites may have regarding the rates. See "What's New from the UBO Training Center" in this newsletter for tentative dates and times.

5. What's Next for Cosmetic Surgery Billing?

Since the successful launch of the CSET in September 2005, the tool has been distributed to 62 users at various MTFs. An updated tool, CSET version 2.0, along with the updated cosmetic surgery rates, will be released in mid May 2006. This will allow providers to bill patients the new rate for procedures taking place after the 12 June 2006 effective date. Charges for procedures taking place before 12 June should be based on the current CSET and rate.

Changes in this year's CSET include inpatient pricing for abdominoplasty, the addition of procedures for vein stripping, non-facial chemical peels and lipotransfer, and billing policy guidance for a cosmetic surgery procedure performed during a medically necessary procedure. Contact your Service MSA POC for a copy of the latest CSET.

Teleconferences explaining the new tool are scheduled for mid-May. See "What's New from the UBO Training Center" in this newsletter for tentative dates and times.

6. NPI REMINDER!!!

The NPI Type 2 (non-individual) is a *billing* number for communication with external (non-MHS) organizations. The DMIS ID is the MHS facility identifier used within the MHS. Do *not* use an NPI Type 2 for anything other than **billing** (e.g., do not apply for an NPI for veterinary clinics, Reserve components and branch clinics that do not directly receive OHI checks).

7. MSA Metrics Under Development

Now that the third-party metrics are firmly in place, it is time to collect similar data about MSA. Metrics of interest include the Total Dollars in Accounts Receivable at the end of each month, Number of Accounts Receivable, and Aging of Accounts Receivable. To ensure a smooth process, the UBO needs MTFs willing to serve as test sites. Contact your Service POC if you are interested in serving as an MSA Metrics reporting program test site.

8. Your Facility's Compliance Program — Your "Best Friend"

What do you do when a provider is not going back to AHLTA to update codes or documentation? Your facility's compliance plan should help you answer this question. It is your first recourse when faced with questionable bills or when individuals are not performing their

requisite duties. Ask questions *before* submitting the bill to a third-party payor. Follow the steps of your compliance plan for additional actions.

9. MAC Enhancement Reports

The MAC Enhancement was installed on CHCS worldwide in November 2005 to identify additional opportunities to collect from liability insurers for accident- or injury-related healthcare services. When a "yes" answer is noted in response to the question, "Is this related to an Injury or Accident?", the field is flagged to help capture this information.

MAC reporting and claims processing requires that CHCS personnel assign security key KG ADS MAC to the MAC supervisor and other personnel responsible for MAC operations.

Use the following Menu Path:

ADM Ambulatory Data Module -> 2 Ambulatory Data Reports -> MAC Medical Affirmative Claims Services Report

Users who do not currently have access to the ADM menu can gain access through assignment of the new secondary menu option:

Secondary menu: KG ADS RPT INJURY REPORT Medical Affirmative Claims Ser KG ADS RPT INJURY REPORT Medical Affirmative Claims Services Report

See the UBO Web site for recent teleconferences related to this issue. For CHCS release notes, go to:

http://tricare.osd.mil/rm/documents/ubo/SAIC%20Release%20Notes%20for%20MAC%20Enhancemment%2Epdf

10. VA Billing — Inpatient Billing Guidance Being Developed

Using DRGs to bill most inpatient institutional charges is the latest methodology under consideration for MTFs and VA hospitals participating in resource sharing agreements. The TRICARE approach to pricing DRG claims would be used with appropriate payments related to DRG Inlier cases, Short-Stay Outlier cases, Transfer cases, and Long-Stay Outlier cases.

11. CMBB Remains on the Horizon

TMA — UBO, RITPO, CITPO — is moving forward in its quest to implement a Charge Master Based Billing (CMBB) system for patient accounting. It will be similar to the systems used by many civilian healthcare systems in terms of technological capabilities and functionality. While CMBB will create new problems, it will resolve even more existing problems such as the inability to:

- create a professional and an institutional bill for the same encounter;
- have one accounts receivable program (instead of three);
- generate comprehensive management reports;
- automate accounts receivable for all three UBO programs (TPC, MSA, MAC) programs at the MTF, Service headquarters, and TMA levels; and
- support Service directed outsourcing initiatives.

The new CMBB will follow a commercial, off-the-shelf (COTS) acquisition process similar to that used for CCE. It will interface directly with existing systems such as CHCS and laboratory, radiology, and pharmacy modules.

12. What's New from the UBO Training Center

Now that the annual conference is over, teleconferences will be next best tool to help "front-line users perform their day-to-day jobs." Save these tentative dates for upcoming teleconferences (watch the UBO Web Site for any changes to these dates and times):

SIT/OHI Conversion Update

- Tuesday, 11 April 2006 1100 EDT and 1400 EDT
- Thursday, 13 April 2006 0800 EDT, 1100 EDT, and 1400 EDT

This teleconference will feature *new* information on pre-conversion activities with lessons learned AFTER the December 2005 Madigan conversion. Representatives from CHCS, DMDC will be on hand to field questions from the audience.

Cosmetic Surgery Estimator Tool (CSET), version 2.0 - TENTATIVE

- Monday, 15 May 2006 0800 EDT and 1400 EDT
- Monday, 22 May 2006 0800 EDT and 1400 EDT (for providers)

This teleconference will provide the details of the newest tool.

OIB Rate Package Explained! - TENTATIVE

- Tuesday, 6 June 2006 0800 EDT and 1400 EDT
- Thursday, 8 June 2006 0800 EDT and 1400 EDT

This teleconference will discuss the 2006 Rates, which are estimated to become effective 12 June 2006, for CMAC/CMAC Components, Anesthesia, Ambulance, Dental, DME/DMS, Immunization, the Pharmacy Dispensing Fee, and the IMET/IAR percentages.

Abbreviations/Acronyms in This Newsletter

Abbreviations/Acronyms in This Newsletter	
AHLTA	The military's electronic health record
CCE	Coding Compliance Editor
CFO	Chief Financial Officer
CHCS	Composite Health Care System
CITPO	Clinical Information Technology Program Office
CMAC	CHAMPUS Maximum Allowable Charges
CMBB	Charge Master Based Billing
COTS	Commercial, off-the-shelf [product]
CPT	Current Procedural Terminology
CSET	Cosmetic Surgery Estimator Tool
DEERS	Defense Enrollment Eligibility Reporting System
DMDC	Defense Manpower Data Center
DME	Durable Medical Equipment
DMS	Durable Medical Supplies
DoD	Department of Defense
DRG	Diagnosis Related Group
EDT	Eastern Daylight Time
HCPCS	Healthcare Common Procedure Coding System
IAR	Interagency Rate
IMET	International Military Education and Training
MAC	Medical Affirmative Claims
MHS	Military Health System
MSA	Medical Services Account
MTF	Military Treatment Facility
NPI	National Provider Identifier (Type 1 – individual;
	Type 2 – institutional/organizational)
OHI	Other Health Insurance
OIB	Outpatient Itemized Billing
POC	Point of Contact
RITPO	Resources Information Technology Program Office
SIT	Standard Insurance Table
SSM	Site Security Manager
TMA	TRICARE Management Activity
TPC	Third-Party Collections
TPOCS	Third-Party Outpatient Collections System
UBO	Uniform Business Office
UBU	Uniform Biostatistical Utility

UBO Reference Portals Uniform Business Office (UBO)

http://tricare.osd.mil/rm/index.cfm?pageId=10
Uniform Biostatistical Utility (UBU)

http://www.tricare.osd.mil/org/pae/ubu/default.htm

MHS Helpdesk

http://www.MHS-helpdesk.com

Third Party Outpatient Collection System (TPOCS)

http://www.tpocshelpdesk.com

CHCS Implementation Alerts and OIB

https://fieldservices.saic.com

UBO Questions

ubo.helpdesk@altarum.org